

**Application for Premanufactured Unit**  
Michigan Department of Labor & Economic Growth  
Bureau of Construction Codes & Fire Safety  
Plan Review Division  
P.O. Box 30255  
Lansing, MI 48909  
517/241-9328

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Agency Use Only

Authority: 1972 PA 230  
Completion: Voluntary  
Penalty: Plans will not be reviewed

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

**Note: The applicant is responsible for all fees applicable to this application.**

<b>MANUFACTURER</b>									
PRIMARY MANUFACTURER NAME (Note: Building Systems Approval Report and approved plans will be sent to this address)						C.A. NUMBER			
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MANUFACTURER NAME						C.A. NUMBER			
<b>DESIGN DATA</b>									
DESCRIPTION OF MANUFACTURED MODEL									
USE GROUP		CONSTRUCTION TYPE		OCCUPANT LOAD ACTUAL    CALC. _____ PERSONS			TYPE OF UNIT MODULAR    CORE    COMPONENT		
ROOF LIVE/SNOW LOAD PSF		FLOOR LIVE LOAD PSF			GROUND SNOW LOAD PSF				
WIND SPEED MPH		ROOF DEAD LOAD PSF		FLOOR DEAD LOAD PSF			HEATING DEGREE DAYS		
<b>PLAN REVIEW REQUEST</b>									
BUILDING		ELECTRICAL		MECHANICAL			PLUMBING		
<b>PROJECT ARCHITECT/ENGINEER</b>									
NAME					MICHIGAN LICENSE NUMBER		TELEPHONE NUMBER		
ADDRESS			CITY			STATE		ZIP CODE	
<b>APPLICANT</b> (Note: All correspondence, except approval, will be sent to this address)									
COMPANY				NAME			SOCIAL SECURITY NUMBER OR FEIN (REQUIRED)		
ADDRESS			CITY		STATE	ZIP CODE	TELEPHONE NUMBER		
APPLICANT SIGNATURE (Must be an original signature)			DATE		EMAIL			FAX NUMBER	

ITEM	LOCATION		
	PLANS Sheet No.	SPECIFICATIONS Page No.	SYS. MANUAL Page No.
<b>BUILDING</b>			
MATING DETAILS			
FOUNDATION CONNECTION DETAILS			
EXTERIOR ELEVATIONS			
MAJOR CROSS SECTIONS			
WALL SECTION			
FLASHING DETAILS			
ATTIC ACCESS			
ATTIC VENTILATION			
EXTERIOR MATERIALS & FINISHES			
INTERIOR MATERIALS & FINISHES			
FIRE SEPARATION ASSEMBLY LOCATIONS			
DOOR/WINDOW SCHEDULES			
FOUNDATION PLANS			
CRAWL SPACE VENTING			
ENERGY CONSERVATION CALCULATIONS			
ACCESSIBILITY DETAILS			
LOCATION OF SMOKE DETECTORS			
FIRE RESISTANCE RATING/DETAILS			
FIRESTOPPING/DRAFTSTOPPING DETAILS			
STAIR DETAILS			
TOXICITY & FLAME SPREAD RATING FOR INTERIOR FINISHES			
DESIGN SOIL BEARING CAPACITY			
FOUNDATION LOADS			
FOUNDATION SIZES & DETAILS			
STRUCTURAL FRAMING DETAILS			
HEADER/LINTEL SCHEDULES			
TRUSS DESIGN			
FASTENER SCHEDULE			
LABEL & DATA PLATE LOCATION			
SITE INSTALLED ITEMS			
<b>ELECTRICAL</b>			
PANEL SCHEDULE(S)			
SERVICE EQUIPMENT PLAN OR RISER DIAGRAM			

ITEM	LOCATION		
	PLANS Sheet No.	SPECIFICATIONS Page No.	SYS. MANUAL Page No.
GROUNDING METHOD AND DETAILS			
LOAD CALCULATIONS			
SIZE OF FEEDERS AND BRANCH CIRCUIT			
LOCATION OF MAIN DISCONNECT			
METHOD OF INTERCONNECTION BETWEEN UNITS			
LOCATION OF OUTLETS AND JUNCTION BOXES			
FIXTURE MOUNTING METHOD			
SPECIAL EQUIPMENT OR APPLIANCE LOCATIONS			
OPTIONAL EQUIPMENT PLANS OR DETAILS			
SITE INSTALLED ITEMS			
<b>MECHANICAL</b>			
IS HEATING SYSTEM INSTALLED IN THE FACTORY? YES NO			
IS HEATING EQUIPMENT SUPPLIED? YES NO			
HEATING AND COOLING EQUIPMENT LOCATIONS			
EQUIPMENT LOAD CALCULATIONS			
DUCT DESIGN CALCULATIONS			
DUCT AND REGISTER LAYOUTS			
LOCATIONS OF EXHAUST GRILLS IN BATHROOMS			
EXHAUST DUCT MATERIAL			
COMBUSTION AIR REQUIREMENTS			
VENTILATING AIR REQUIREMENTS			
VENTING SYSTEMS			
FIRE DAMPER LOCATIONS			
AIR BALANCING DEVICE LOCATIONS			
SMOKE DETECTORS IN DUCTWORK			
SPRINKLER SYSTEM			
SPRINKLER PLANS			
SPRINKLER CALCULATIONS			
MANUFACTURED FIREPLACE SPECIFICATION			
SITE INSTALLED ITEMS			
<b>PLUMBING</b>			
WATER PIPING SYSTEM			
AIR CHAMBERS			
VACUUM BREAKER ON HOSEBIBBS			

ITEM	LOCATION		
	PLANS Sheet No.	SPECIFICATIONS Page No.	SYS. MANUAL Page No.
SHOWER VALVES, TYPE AND TEMPERATURE SETTING			
INDIRECT WASTE			
CLEANOUTS			
SUBMIT RISER DIAGRAM			
MATERIAL-SPECIFICATIONS			
WATER HEATER DETAILS			
PIPE HANGER SPACING			
ACCESS PANEL LOCATION			
SITE INSTALLED ITEMS			

#### FEE CALCULATION

ITEM	FEE (each)	NUMBER	TOTAL
<b>ONE- AND TWO-FAMILY DWELLINGS</b>			
NEW MODEL (ONE FOUNDATION SYSTEM)	\$200.00		
FOUNDATION OPTIONS	\$50.00		
REVERSE PLAN	\$50.00		
VARIOUS OPTIONS	\$50.00		
ADDITIONAL MANUFACTURER(S) SUBMITTAL (NOT PRIMARY)	\$50.00		
<b>OTHER THAN ONE- AND TWO-FAMILY DWELLINGS</b>			
NEW MODEL (ONE FOUNDATION SYSTEM) <b>\$100 minimum</b> <input type="checkbox"/> BUILDING <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> MECHANICAL <input type="checkbox"/> PLUMBING			
ADDITIONAL MANUFACTURER(S) SUBMITTAL (NOT PRIMARY)	\$50.00		
		<b>GRAND TOTAL \$ _____</b>	

#### Instructions for Application for Premanufactured Unit

**Manufacturer:** Multiple plants may be listed. Provide manufacturer name and compliance assurance (C.A.) number for each plant. The information provided must match the information on file.

**Design Data:** Provide all requested information. The building use, construction type and number of occupants shall be as prescribed by the building code.

**Plan Review Request:** Mark all plan reviews desired or required.

**Project Architect / Engineer:** Provide all requested information.

**Applicant:** Provide all requested information with an original signature. All correspondence, except approval, will be sent to this address, and this entity will be responsible for all fees.

#### Required Submittals for Plan Review

For each model, submit completed application, the appropriate deposit fee made payable to the **State of Michigan** and three (3) sets of plans and/or specifications with **original seals and signatures** in accordance with 1980 PA 299.

#### Upon Receipt of All Applications

Written confirmation will be sent to the applicant. Further correspondence, concerning the requested plan reviews, will be sent to the applicant and the inspection agency. A copy of the Building Systems Approval Report(s) and two (2) sets of approved plans will be shipped to the primary manufacturer for appropriate distribution to any additional listed plants and inspection agency(ies).

#### US POSTAL SERVICE OR DELIVERIES OTHER THAN OVERNIGHT

Michigan Dept. of Labor & Economic Growth  
Bureau of Construction Codes & Fire Safety  
Plan Review Division  
P.O. Box 30255  
7150 Harris Drive  
Lansing, MI 48909

#### OVERNIGHT DELIVERY

Michigan Dept. of Labor & Economic Growth  
Bureau of Construction Codes & Fire Safety  
Plan Review Division  
2501 Woodlake Circle  
Okemos, MI 48864

Validation Area